

No. <b>W 161257</b>  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 04/30/2018</b>  <b>1. Mailing Address: Correct in this box if needed.</b> HIGHWAY 95 SOUTH LLC JOHN A BIEKER 2276 BLAINE RD MOSCOW ID 83843 USA	<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> JOHN BIEKER 2276 BLAINE RD MOSCOW ID 83843  <b>3. New Registered Agent Signature.</b>				
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>						
Manager or Member Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	BETH BECKER	1008 587 STREET	VERADALE	WA	USA	99237
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	JOHN BIEKER	2276 BLAINE RD	MOSCOW	ID	USA	83843
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
<b>5. Organized Under the Laws of:</b>  <div style="text-align: center; font-weight: bold;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 161257</div>		<b>6.</b> Signature: <u>John A Bieker</u> Date: <u>052318</u> Name (type or print): <u>JOHN A BIEKER</u> Title: <u>Member / Agent</u>				

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